

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 33074
Name: Dart Cherokee Basin Operating Co., LLC
Address: P O Box 177
City/State/Zip: Mason MI 48854-0177
Purchaser: Oneok
Operator Contact Person: Beth Oswald
Phone: (517) 244-8716
Contractor: Name: McPherson
License: 5675
Wellsite Geologist: Bill Barks

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>7-10-03</u>	<u>7-12-03</u>	<u>7-31-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-30335-00-00
County: Montgomery
NE SW NE Sec. 27 Twp. 33 S. R. 14 East West
3611' FSL feet from S / N (circle one) Line of Section
1700' FEL feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Manning Well #: B3-27
Field Name: Wayside-Havana
Producing Formation: Penn Coals
Elevation: Ground: 904' Kelly Bushing: _____
Total Depth: 1546' Plug Back Total Depth: 1544'
Amount of Surface Pipe Set and Cemented at 23' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT#2 KGR 5/23/07
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Beth Oswald
Title: Admn Engr Asst Date: 3.4.04
Subscribed and sworn to before me this 4th day of March,
2004.
Notary Public: Karen L. Welton
Date Commission Expires: My Comm. Expires Mar. 3, 2007

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



Operator Name: Dart Cherokee Basin Operating Co., LLC Lease Name: Manning Well #: B3-27
 Sec. 27 Twp. 33 S. R. 14 East West County: Montgomery

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: High Resolution Compensated Density Neutron	Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum See Attached <div style="text-align: center;"> RECEIVED MAR 08 2004 KCC WICHITA </div>
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CASING RECORD New Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surf	11"	8 5/8"		23'	Class A	4	
Prod	6 3/4"	4 1/2"	10.5	1544 195'	50/50 Poz	195	See Attached

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
6	1432'-1433'	300 gal 12% HCl, 1635# sd, 230 BBL fl	
6	1142.5'-1144'	300 gal 12% HCl, 2385# sd, 255 BBL fl	
6	1098.5'-1099.5'	300 gal 12% HCl, 1530# sd, 205 BBL fl	
6	1072.5'-1073.5'	300 gal 12% HCl 1570# sd, 205 BBL fl	
6	1053'-1055.5'	300 gal 12% HCl, 5315# sd, 325 BBL fl	

TUBING RECORD		Size 2 3/8"	Set At 1521'	Packer At NA	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Enhr. 8-19-03		Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>			
Estimated Production Per 24 Hours	Oil Bbls. NA	Gas Mcf 9	Water Bbls. 37	Gas-Oil Ratio NA	Gravity NA

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
 (If vented, Sumit ACO-18.) Other (Specify) _____

McPherson Drilling LLC Drillers Log

ORIGINAL

Rig Number: 3	S. 27	T. 33	R. 14e
API No. 15- 125-30335	County: MG		
Elev. 904'	Location: NE SW NE		

Gas Tests:

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Operator: Dart Cherokee Basin Operating Co. LLC			
Address: 3541 CR 5400 Independence, KS. 67301			
Well No: B3-27	Lease Name:	Manning	
Footage Location:	3611 ft. from the	South	Line
	1700 ft. from the	East	Line
Drilling Contractor: McPherson Drilling LLC			
Spud date: 7/10/2003	Geologist:		
Date Completed: 7/12/2003	Total Depth: 1546'		

Casing Record			Rig Time:	
	Surface	Production	2.0 hrs.	Gas tests
Size Hole:	11"	7 7/8"		
Size Casing:	8 5/8"			
Weight:	20#			
Setting Depth:	23'	McPherson		
Type Cement:	Portland			
Sacks:	4	McPherson		

Remarks:

Start injecting water @ 260'

A little oil on pit when unloading hole morn of 7/12/03

Well Log										
Formation	Top	Btm.		Formation	Top	Btm.		Formation	Top	Btm.
soil/clay	0	6		shale	899	960				
sand stone	6	12		sand/shale	960	985	odor			
lime	12	15		1st oswego	985	1015	oil			
shale	15	81		summit	1015	1027				
lime	81	87		2nd oswego	1027	1048	oil			
shale	87	210		mulky	1048	1054				
lime	210	226		3rd oswego	1054	1064				
shale	226	238		shale	1064	1074				
lime	238	255		coal	1074	1077				
sand	255	290	no sho	shale	1077	1101				
sand/shale	290	300		coal	1101	1103				
sand	300	371	no sho	shale	1103	1141				
lime	371	375		coal	1141	1143				
shale	375	465		shale	1143	1209				
lime	465	470		sand/shale	1209	1255				
shale	470	660		shale	1255	1390				
lime	660	676		coal	1390	1394				
shale	676	680		shale	1394	1442				
sand	680	702	no sho	sand/lime	1442	1454				
oil sand	702	726		Mississippi	1454	1546	TD			
sand/shale	726	742								
lime	742	768								
sand/shale	768	879								
pink lime	879	899								

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TO 393
 POONY 117
 JH # 237
 Mike's T.P.

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 MAR 08 2004
 KCC WICHITA

ORIGINAL

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 OR 800-467-8676

TICKET NUMBER 21258
 LOCATION B'ville
 FOREMAN JFB

TREATMENT REPORT

DATE <u>7-14-03</u>	CUSTOMER ACCT # <u>2368</u>	WELL NAME <u>MANNING B3-27</u>	QTR/QTR	SECTION <u>27</u>	TWP <u>33</u>	RGE <u>14</u>	COUNTY <u>MOAT</u>	FORMATION
CHARGE TO <u>DART</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE		ZIP CODE		DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA	
HOLE SIZE	<u>6 3/4</u>
TOTAL DEPTH	<u>1546</u>
CASING SIZE	<u>4 1/2</u>
CASING DEPTH	<u>1544</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
SURFACE PIPE	THEORETICAL	INSTRUCTED
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB

JOB SUMMARY

washed casing to T.D.
~~As per treatment sheet~~
 DESCRIPTION OF JOB EVENTS Est. Circ - ran 2 sx gel ahead of 10 BBC Sorner
mad flush followed by 10 BBC clean H₂O - ran 195 sx 50/50
5#, 59, 270, 1/2# w/hulls @ 13.5 PPG - shut down - washed out
lines & pump - dropped plug - displaced to bottom & set shoe - shut in -
landed plug @ 1200# - CIRCO amt. to surface

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

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KCC WICHITA

ORIGINAL

TICKET NUMBER 22129

LOCATION B'ville

FIELD TICKET

DATE 7-14-03	CUSTOMER ACCT # 2368	WELL NAME MANNING B3-27	QTR/QTR	SECTION 27	TWP 33	RGE 14	COUNTY MONT	FORMATION
CHARGE TO DART				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE LONGSTRING		525.00
1110	20 SX	GILSONITE	*	388.00
1111	450 #	SALT	*	45.00
1118	6 SX	GEL	*	70.80
1107	3 SX	FLO seal	*	113.25
1105	2 SX	HULLS	*	25.90
1238	1 GAL	FOAMER		30.00
1205	1 1/2 GAL	B1-CIDE		33.75
1123	5800 GAL	CITY H2O	*	65.25
4404	1 ea.	4 1/2 rubber plug	*	27.00
5407	MIN	BLENDING & HANDLING TON-MILES		190.00
		STAND BY TIME		
		MLEAGE		
5501	4 HR	WATER TRANSPORTS		300.00
5502	4 HR	VACUUM TRUCKS		280.00
		FRAC SAND		
1124	195 SX	CEMENT 50/50	*	1257.75
			* SALES TAX	109.62

ESTIMATED TOTAL 3461.40

CUSTOMER or AGENTS SIGNATURE [Signature] CIS FOREMAN Jeff Gehan 3161.84

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

125264